

"Express Mail" mailing label number EV53026045US

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	C 2869 PCT/US
		First Named Inventor	SCHMID, Karl Heinz
		COMPLETE IF KNOWN	
		Application Number	
		Filing Date	
		Group Art Unit	
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Examiner Name	

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COSMETIC OLIGO- α -OLEFIN CONTAINING COMPOUND

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **04/07/2004** as United States Application Number or PCT International

Application Number **PCT/EP2004/003693** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		YES	NO
103 17 781.7	Germany	04/16/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
103 24 508.1	Germany	05/28/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
103 36 172.3	Germany	08/07/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Type a plus sign (+) inside this box + ☐

C 2869 PCT/US

DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP2004/003693	04/07/2004	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Firm Name	23657	Customer Number	or label	
OR				
<input type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below:				

Name	Registration Number	Name	Registration Number

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number **23657** OR ☐ Fill in correspondence address below

Name						
Address						
Address						
City		State		Zip		
Country		Telephone		Fax		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Karl Heinz	Middle Initial		Family Name	SCHMID	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Mettmann	State		Country	Germany	Citizenship	German
Post Office Address	Stifterstrasse 10						
Post Office Address							
City	40822 Mettmann	State		Zip		Country	Germany
Applicant Authority							
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Type a plus sign (+) inside this box ☐

C 2869 PCT/US

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet										
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name	Alfred			Middle Initial			Family Name	WESTFECHTEL			Suffix e.g. Jr.									
Inventor's Signature							Date													
Residence: City		Hilden			State				Country		Germany		Citizenship		German					
Post Office Address		Menzelweg 74																		
Post Office Address																				
City		40724 Hilden			State				Zip				Country		Germany		Applicant Authority			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name	Achim			Middle Initial			Family Name	ANSMANN			Suffix e.g. Jr.									
Inventor's Signature							Date													
Residence: City		Erkrath			State				Country		Germany		Citizenship		German					
Post Office Address		Kirchberg 25																		
Post Office Address																				
City		40699 Erkrath			State				Zip				Country		Germany		Applicant Authority			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name	Markus			Middle Initial			Family Name	DIERKER			Suffix e.g. Jr.									
Inventor's Signature							Date													
Residence: City		Duesseldorf			State				Country		Germany		Citizenship		German					
Post Office Address		Benrodestrasse 129																		
Post Office Address																				
City		40597 Duesseldorf			State				Zip				Country		Germany		Applicant Authority			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name	Stefan			Middle Initial			Family Name	BRUENING			Suffix e.g. Jr.									
Inventor's Signature							Date													
Residence: City		Philadelphia			State		PA		Country		USA		Citizenship		German					
Post Office Address		32 East Springfield Avenue																		
Post Office Address																				
City		Philadelphia			State		PA		Zip		19118		Country		USA		Applicant Authority			
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto																				